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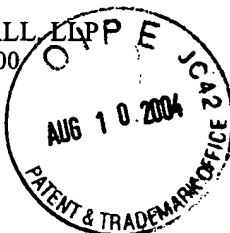
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26753 7590 03/09/2004

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Barbara A. Johnson (Depositor's name)
 Barbara A. Johnson (Signature)
 8-5-04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/611,713	07/01/2003	Mitsuyuki Uchikoshi	1779-00016	4463

TITLE OF INVENTION: BODY TENSION APPARATUS FOR SHIRTS PRESS MACHINE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/09/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMITH, JAMES G	3765	223-085000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Kousha Co., Ltd

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies 10

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(Date)

8-5-04

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08/11/2004 SHASSEN2 00000077 10611713

02 FC:2501
 03 FC:1504
 04 FC:8001

665.00 OP
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